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ARMY MEDICINE PRIORITIES

COMBAT CASUALTY CARE

Army Medicine personnel, services, and doctrine that save Service members' and DOD Civilians' lives and maintain their health in all operational environments.

READINESS AND HEALTH OF THE FORCE

Army Medicine personnel and services that maintain, restore, and improve the deployability, resiliency, and performance of Service members.

READY & DEPLOYABLE MEDICAL FORCE

AMEDD personnel who are professionally developed and resilient, and with their units, are responsive in providing the highest level of healthcare in all operational environments.

HEALTH OF FAMILIES AND RETIREES

Army Medicine personnel and services that optimize the health and resiliency of Families and Retirees.

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TSG SPEAKS!

Army Surgeon General Receives Honorary Doctorate, Delivers Keynote Address at NYIT Commencement Ceremony

Excerpts from the keynote commencement remarks given by Army Surgeon General, Lt. Gen. Patricia Horoho on May 19 at the New York Institute of Technology's (NYIT) College of Osteopathic Medicine's hooding ceremony.

Thank you President Guiliano, Vice-President Barbara Ross-Lee, NYIT Board of Trustees, distinguished alumni and faculty, Family members, friends, and finally, the NYIT College of Osteopathic Medicine Class of 2014.

I am humbled and honored to accept the Riland Medal for Public Service on behalf of all the men and women who have served in military medicine and especially those who serve today around the globe. Thank you.

Today's medicine is almost entirely focused on the science of medicine and not the art of healing, and we as a nation are not getting healthier. You here today have an advantage. NYIT is unique in its curriculum which instills both competency and compassion — the science AND the art of medicine.

Why is that important?

Just like music is more than the notes, health is more than healthcare. Healthcare is what we dispense during patient visits to our offices, clinics, and hospitals. That's not where health happens. Healthcare for sure, but not health. Health happens between patient visits, in their homes, at their work, and in their communities. It happens in the thousands of decisions they make every day. So how do you as a doctor influence their health? Stop, Look, Listen and Feel.

In the high tech world of modern medicine it's easy to focus only on the monitors, lab tests, and imaging studies to rely on pills, procedures, and invasive diagnostics. The path to health doesn't reside there, treatment for sure, but not healing. Optimal healing occurs only



Lt. Gen. Patricia D. Horoho

after you've developed a mutual trust, built a relationship and truly understand the source of a problem, and not just the chief complaint. To do so doesn't require hours, days or months. It's done by taking the time to hear their story, know their Family, profession, hobbies, whatever it is that makes them — well — *them*.

Everyone is more than a patient, more than an illness, an injury, or a disease.

There lies the true art of medicine, the ability to influence the patient's health and healing outside of the bricks and mortar of our facilities — to provide curative and not simply palliative therapy, to help them maintain, and improve their health; not simply restore it after it's lost.

And what about your Life?

In today's fast-paced world, we have to make a conscious decision to Stop, Look, Listen, and Feel. The risk, if we don't, is that we simply exist, carried day to day by the torrid currents of daily life. And before we know it, we miss it. In the ordinary minutes of our day, there are extraordinary moments to be experienced. That is Life.

It is what happens between the notes, in the quiet moments, in the struggles,

the tragedies, and the triumphs. It's the connections, the love, the joy, the peace, and well-being. It's your friends, your colleagues, and your loved ones. It's the laughter, the birthdays, the dog, and the cat. They all provide the richness, texture, and color to life.

That is the art that balances the science.

The most important thing that's engraved on tombstones isn't the dates, though that's where we focus most of our attention. It's the dash. That's where life happens. It's what's between those dates that matters.

As I conclude my remarks, I challenge each of you in all of your endeavors to Stop, Look, Listen and Feel. Use the experiences of your upbringing, your formal education, and your actions going forward to restore and maintain a balance between science and art. Reclaim a focus on health that values equally, the Science of Medicine, and the Art of Healing.

That would make Hippocrates proud, make your Families proud, and at the end of long and successful careers that begin today, make you proud to have served as medical professionals.

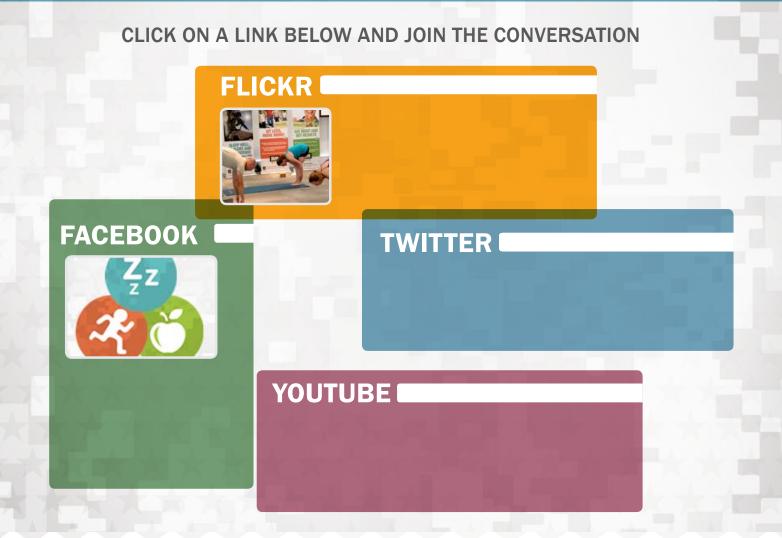
Remember to practice the Art – in medicine and in life. With that, I again congratulate you all. I encourage you to go out and do great things, live a balanced life and once again claim medicine's nobility of service to humanity. There is no greater gift one could give to future generations. I wish you Godspeed on your journey.

Horoho is the first military member and nurse to receive the NYIT's Riland Public Service Award. Horoho also commissioned nine graduates into the Armed Forces (three Army, three Navy, and three Air Force).

The complete speech and photos from the commencement can be found at http://www.nyit.edu/commencement/.



CONNECT WITH ARMY MEDICINE



\bigstar

NFL Wellness Team, Army Medicine Leaders Tour National Intrepid Center

By Stephanie P. Abdullah, Army Medicine Public Affairs

Members from the National Football League's Health and Safety Policy team recently met with Army Medicine staffers, including Dr. Stephanie Maxfield-Panker, traumatic brain injury (TBI) program manager, Office of the Surgeon General, and Brig. Gen. Patrick Sargent, deputy chief of staff, operations, U.S. Army Medical Command, in an effort to increase the momentum of the Army/ NFL initiative on the TBI/concussion program. The program began in 2012, with a goal of increasing awareness among Soldiers and athletes of mild TBI/concussion and decreasing stigmas associated with them seeking care for this often invisible wound.

Sargent led the discussion to expand the collaboration with the NFL, which has a worldwide platform with which to help influence healthy behavioral change among Soldiers and potential recruits. Discussions revolved around collaborations related to Sleep, Activity, and Nutrition - the three tenets of the Army's Performance Triad, behavioral health, and the smooth Soldier/athlete transitions from military and sports careers (i.e., Soldier for Life).

"Growing our alliance with the NFL is extremely important," said Sargent who oversees Army Medicine's Health



Jeff Miller, senior vice president NFL Health and Safety Policy, listens as art therapist Jacqueline Biggs talks him through art work created by traumatic brain injury patients at the National Center of the Intrepid Spirit at Fort Belvoir, Va. (U.S. Army photo by Stephanie P. Abdullah)

and Wellness Division, which is the proponent for the Performance Triad. "Some of our young Soldiers are very impressionable. We see NFL athletes as integral collaborators as we aim to persuade Soldiers and recruits toward healthier lifestyles."

Jeff Miller, senior vice president NFL Health and Safety Policy echoed Sargent's sentiment.

"The NFL and the Army have had a very strong relationship for many years, and our collaboration around TBI provides an opportunity to work together to promote better health outcomes for both Soldiers and NFL players," Miller said.

"There is great mutual respect that exists between Soldiers and NFL players," he said. "The two groups share many cultural similarities and values, including a strong sense of team, determination, commitment, and passion. Beyond that, our players and everyone else associated with the NFL has tremendous admiration for the courage and sacrifice made by all those in our armed forces."

Both sides hope to increase Soldier/ athlete interactions as a means to increase concussion information sharing opportunities.

"When Soldiers and NFL players interact it is always very positive. While there are significant differences in what their work demands, the two groups often approach their jobs in similar ways. They speak similar languages and believe in similar values. This makes it easy for them to communicate and learn from each other," Miller said.

The NFL visit also included a briefing and tour of the National Intrepid Center of Excellence Spirit (NICOE Spirit), at Fort Belvoir, Va.

Dr. Heechin Chae, the NICOE Spirit director, discussed his unique approach to

the treatment of traumatic brain injury, commonly known as TBI.

"I was able to implement the best of the best techniques that I have learned from many years of experience in the civilian sector," said Chae, who established the program at the NICOE Spirit, which focuses on a holistic interdisciplinary model of TBI care.

At the NICOE Spirit, patients experience a healing approach that includes neurology, behavioral health, art therapy, vision therapy, as well as spiritual support all under one roof.

"Neither the NFL nor the Army has all the answers, especially when it comes to a complicated injury like a concussion," said Miller. "Working together, the NFL and the Army will learn from each other, and in the process, help make our Soldiers and players safer."

While Army Medicine seeks to expand the Army's relationship with the NFL, the current initiative aims to increase concussion awareness and decrease the stigma associated with seeking help.

"Seeking help for an invisible wound such as concussion (mild TBI) is an act of courage that benefits the entire team, whether that team is a football team in the NFL or a unit in a combat zone, or a little league baseball team back in garrison," said Sargent.

Maxfield-Panker, the Army's TBI program manager noted that 80 percent of the Department of Defense's TBI's are sustained in a garrison (non-combat) environment. As such, research, focus, and continued efforts to encourage help seeking behaviors is critical even as the U.S. pulls forces out of Afghanistan.

For more information on TBI and the Army's initiative with the NFL, visit www.army.mil/tbi and www.nfl.com/military.



Christopher Baker (standing), a health educator at the Fort Carson Army Wellness Center, has members of the Evans Army Community Hospital staff bear crawl during the hospital's participation in the Army Medicine Performance Triad Kickoff week. The bear crawl was just one of the exercises they did during a SPARQ (speed, power, agility, reaction, quickness) sports conditioning session. Muscle strengthening activities should be done at least two days a week working all major muscle groups to stay fit, and all should engage in 150 minutes per week of moderate exercise. This helps with chronic pain, depression, anxiety, and stress. Enjoyable activities like jogging, playing a sport, or dancing make exercise fun. (U.S. Army photo by Jeff Troth)

Performance Triad Kickoff Week:

Fort Carson Celebrates The Performance Triad: The Right Health Focus for All

By USAMEDDAC-Fort Carson Public Affairs

Army Medicine formally kicked off the Army-wide Performance Triad campaign the first week in June, to positively influence the health and behaviors of the entire Army Family.

The triad includes Sleep, Activity, and Nutrition, elements that significantly contribute to health, performance, and resilience.

"These are important because they are the BIG 3 when it comes to a healthy lifestyle," said Capt. Kelly Kaim, Evans Army Community Hospital's chief outpatient dietitian. "Even having one of these out of sync can impact how we feel and how good we can do our job."

The Army's surgeon general is focused on transforming Army Medicine from a healthcare system to a System for Health that focuses on promoting healthy behaviors and addresses health issues

before they become health problems. To support this initiative the Medical Command developed this campaign using the theme "Performance Triad: Your prescription for a longer, healthier life."

"The Performance Triad is the Army's answer to the obesity crisis that is overwhelming our nation and military," said Tony Heinz, project lead at Fort Carson's Army Wellness Center. "The Fort Carson community is responding to the initiative by overwhelming the Army Wellness Center, Nutrition Care Division, and MWR fitness centers to learn more about improving their health and wellness." MWR is the term for morale, welfare, and recreation.

The Army Wellness Center measures people's true physical condition using state of the art equipment and the latest evidence-based information. It employs a "BOD POD" to accurately measure a client's body fat versus lean tissue and, among other activities, offers metabolic testing, fitness (VO2 SubMax) testing, and education and evaluation on healthy sleep habits.

The center's clients are often eager to tell their stories about their journeys to a healthier lifestyle.

"According to the Army tape test, I was within compliance but considered my overall health to be mediocre at best," said Maj. Clint Magana, chief of inpatient services at Evans hospital. "As a healthcare professional, I felt that I had the knowledge to do it myself but I lacked the determination. Swallowing my pride, I went to the Wellness Center and took the classes they offered."

Magana had an appropriate 7-8 hour

Performance Triad Kickoff Week

sleep routine. Sleeping less or not having quality sleep could have caused him serious short- and long-term consequences – from impairing daily readiness through reduced alertness and concentration to increasing risk for obesity, cardiovascular disease and depression. Fatigue and drowsiness from poor sleep could also have caused accidents and could be fatal.

The Center's staff assessed his overall physical condition and encouraged him to increase his activity to about 10,000 steps per day and said he should work out more often, but it was his diet that primarily affected his health. He said it was the "little things" that were affecting him. He had forgotten about eating more fruits and vegetables, cutting out the sodas, eating less processed food, and about choosing his foods more carefully and eating smaller portions, more often.

"Losing the weight was not as easy as when I was 21 and continuously active. The Wellness Center helped me develop a plan, execute it, and held me accountable by having me come in every month to check my progress," he said. "Now, I'm still tired at the end of the day but I feel better overall."

A Blackhawk Pilot, Chief Warrant Officer 2 Jomond Ervin looked into the mirror and didn't like what he saw.

"I was ashamed," he said realizing that he needed to get his eating habits in check. Ervin's unit medic referred him to the Wellness Center; the staff there suggested he change the way he eats by controlling his intake of calories and prescribed weight lifting.

"The combination...is what I needed to move in the right direction to losing weight and feeling better about myself, in and out of uniform," he said. "My overall health now has skyrocketed! I feel better about myself and all I needed was to meet the right people, remain motivated for the cause, and change my lifestyle to a healthier one."

Rory Travis is an Army Retiree and the

manager of the Comprehensive Soldier & Family Fitness Training Center. He considered himself generally healthy but his arthritis caused pain when working out and not working out caused him to gain weight.

"I lost sight of the meaning and purpose to be at my best physically and was losing my mental edge and drive," he said. "I got winded carrying laundry up and down stairs...I realized my quality of life and chances of longevity were slipping away from me."

When Travis heard about the I-Heart Challenge, he found himself at the Wellness Center and made use of the resources there.

"The Fort Carson AWC I-Heart Challenge introduced me to assessment tools, a knowledgeable and helpful AWC staff, and available resources to evaluate and improve my physical performance and overall health," he said. "I now run and bike four or five times a week and I started going back to the gym for strength and conditioning. There is no question that I've experienced a marked increase in my overall health and attitude; I've gone from good to great health...I feel stronger, leaner and more mentally agile."

"Everyone should take advantage of the Army Wellness Center," said Heinz. "We are always expanding equipment and staff to keep up with the community demands for the service. Improving your Sleep, Activity, and Nutrition will improve the quality and longevity of your life."

In concert with the Wellness Center's efforts, Evans hospital's Nutrition Care Division supports the Performance Triad by routinely conducting nutrition education classes for leaders, Soldiers and Family members. It also inspects Fort Carson's dining facilities for nutrition standards. And, its staff members practice what they preach.

"All our military dietitians have taken part in a 30-day health challenge to eat healthy, get at least seven hours of sleep and we exercise regularly," said Kaim, who also serves as the sports dietitian for the Army's World Class Athlete Program.

According to the Army's Medical Command, obesity rates among adult Army Family members is 32.5 percent which is slightly lower than the national rate but they are subject to the same environmental factors that have contributed to the obesity epidemic nationwide: an abundance of cheap, low-nutrient, high-calorie food, but with limited access to affordable fresh fruits and vegetables. Fruits and vegetables are often more costly than calorie-dense foods of lower nutritional quality. Higher prices of fruits and vegetables are associated with lower intake and increases in body mass index (BMI).

Good nutrition is a part of a healthy "lifestyle," not a "diet." People should increase consumption of fruits and vegetables, whole grains, skim and low fat dairy and lean protein. They should "fuel" properly through a balance of carbohydrates, proteins, and healthy fats to maintain lean muscle mass and they should view food as part of their physical conditioning -- planning meals like planning workouts. Eating right improves physical and cognitive performance, appearance, and improves endurance and stamina.

"I suggest people learn more about the importance of the 'Triad' for their health and start getting plenty of rest, becoming more active, and eating healthier," said Kaim. "The Performance Triad is an idea that is important for people of all ages to pay attention to and following the healthy guidelines we discuss and provide will help to enhance your life."

[To find out more about the Performance Triad: Sleep, Activity, and Nutrition visit: http://armymedicine.mil/ Pages/performance-triad.aspx

Practice Greenhealth Lands Five MTFs for Sustainability Excellence

By Tammy Ford, MEDCOM Environmental Compliance Office

Practice Greenhealth (PGH) recently recognized five military treatment facilities (MTFs) for sustainability achievements. Awards were presented at the CleanMed 2014 Conference held in early June in Cleveland, Ohio. The annual PGH Awards recognize hospitals and healthcare organizations that are protecting patient, staff and community health, as well as the environment. This year marks the fifth straight year that MEDCOM MTFs have received PGH awards.

PGH is the leading nonprofit organization advocating for environmental stewardship and resource efficiency in healthcare.

Madigan Army Medical Center (MAMC) received the Top 25
Environmental Excellence Award and Circles of Excellence Awards for Leadership, Chemicals, Greening the OR, Environmentally Preferable Purchasing, and Green Building. In 2013, MAMC recycled 754 tons of material, up from 640 tons in 2012. In 2012 and 2013, MAMC captured the Environmental Leadership Circle Award, the only federal hospital to receive this honor. In 2014, the Top 25 Environmental Excellence Award replaced

the Environmental Leadership Circle as PGH's highest honor for hospitals.

Evans Army Community Hospital (EACH) received the Emerald Partner for Change and the Climate Circle of Excellence awards. The Emerald Award is competitive and recognizes facilities for improvements in mercury elimination, waste reduction, recycling, and source reduction. In 2013, solar power provided 14 percent of the energy used at EACH. In 2012, EACH earned the Making Medicine Mercury-Free and Partner for Change awards; in 2013 EACH earned the Partner for Change with Distinction award.

Bayne-Jones Army Community
Hospital (BJACH) received the Partner
for Change Award, which it also received
in 2013. The Partner for Change
Award recognizes healthcare facilities
that have implemented a significant
number of environmental programs,
and continuously improve and expand
upon these programs. In 2013, BJACH
replaced polystyrene foam cups and togo containers in the dining facility with
biodegradable cups and containers.

Moncrief Army Community Hospital

(MACH) earned the Partner for Change Award for the third straight year, and also received the Making Medicine Mercury-Free Award in recognition of virtually eliminating mercury from their facility. In 2013, MACH demonstrated a marked increase in recycling for the fourth straight year.

Reynolds Army Community Hospital (RACH) received three awards: Partner Recognition, Making Medicine Mercury-Free, and the DEHP-Free Award. In 2013, RACH reduced the amount of hazardous waste sent for disposal by 35 percent through filtering and recycling chemicals in the laboratory. The Partner Recognition Award is given to healthcare facilities that have begun to work on environmental improvements and have at least a 10 percent recycling rate. The DEHP-Free award is competitive, and is given to the one hospital demonstrating the most success with replacing medical devices containing Di(2-ethylhexyl) phthalate (DEHP) with safer alternatives. RACH is the first federal facility to receive the DEHP-Free Award.



HAPPY, HEALTHY, AND SMART.

Learn more about the Performance Triad: Sleep, Activity, and Nutrition at: armymedicine.mil

H's All About Health.

Foxtrot Company, 232d Medical Battalion Implements Performance Triad Goals Board

By Capt. Dequan B. Jones, Foxtrot Company, 232d Medical Battalion

During their Performance Triad Kickoff week event held June 6, Foxtrot Company (F Co) 232d Medical Battalion, implemented the unit Performance Triad goals board. The intent is to influence the Lifespace of Soldiers by setting obtainable goals and educating them on the importance of making healthier choices. F Co has also incorporated Performance Triad topics into the physical readiness training (PRT) program as part of the daily workout. These topics include sleep management, nutritional choices, and increasing activity in addition to the unit's PRT program. The cadre led the way in identifying goals for themselves and modeled the way for the Soldiers to follow. Many of the Soldiers linked their Performance Triad Goals to PRT, making healthier choices in the Lifespace, and academic goals. We hope to impact Soldiers early in their career with exposure to the Performance Triad and develop positive habits that will remain in place throughout their

lifespan. Soldiers were encouraged to register and use the Army Healthy Eating Activity Lifestyle Training Headquarters (H.E.A.L.T.H.) web and smartphone application (http://armyhealth.pbrc.edu/) to help track and maintain fitness.



Spc. Keith Grant, a prior service 68W (Army Medic) student at Foxtrot Company, 232d Medical Battalion, writes his goals on the unit's Performance Triad goals board. The intent of the goals board is to influence the Lifespace of Soldiers by setting obtainable goals and educating them on the importance of making healthier choices. More than 150 Soldiers participated. Many of the Soldiers linked their Performance Triad goals to PRT, healthier choices during non-period of instruction (POI) time, and academic goals. (U.S. Army photo by 1st Lt. Jason M. Proffitt)

Vets4Warriors

Vets4Warriors is a tremendous, free confidential, 24/7 resource available to all Soldiers and their Families (all services, active duty, National Guard and Reserve). Vets4Warriors (1-855-838-8255 or www.Vets4Warriors.com) is a peer support program staffed by Veterans (80 percent have combat experience). We had the opportunity to spend some time with the Director, Retired

Maj. Gen. Mark Graham (Soldier For Life) of this DOD sponsored program called Vets4Warriors. The call center is contracted with Rutgers University and is staffed by trained Veterans using a proven Peer Support model that offers ongoing support for whatever the caller is dealing with. Vets4Warriors is non-clinical and is not a crisis line. The idea is to get in front of things before they reach the

crisis level. A copy of the current fact sheet and pocket card are available on the www.vets4warriors.com homepage, top right, under downloads. They can also be locally reproduced or the Defense Standardization Program Offic (DSPO) can ship bulk upon request by sending an e-mail request to: Info@vets4warriors. com and they will ensure the right person at DSPO receives the request.



Melanoma-Silent but Deadly

By Velvie Bennett, RN, MSN, FNP-C

Do you love having fun in the sun? If you do, it is essential you protect your skin from exposure to harmful sun rays known to cause skin cancer. Skin cancer is the most commonly diagnosed cancer in the United States, and melanoma is the deadliest skin cancer. According to the National Cancer Institute, more than 68,000 Americans are diagnosed with melanoma each year and another 48,000 are diagnosed with an early form of the disease that involves only the top layer of skin. According to the Centers for Disease Control (CDC) melanoma causes about 8,000 deaths in the U.S. each year.

People with certain risk factors are more likely than others to develop skin cancer. Risk factors vary for the different types of skin cancer but here are some of the general risk factors listed by the CDC:

- Lighter natural skin color
- Family history or personal history of skin cancer
- Chronic sun exposure
- History of sunburns, especially early in life
- History of indoor tanning, especially before age 35
- Skin that freckles, burns, reddens easily or becomes painful in the sun
- Multiple moles (more than 60)

Sun exposure is the most modifiable risk for melanoma. Ultraviolet (UV) rays come from the sun or indoor tanning, such as using a tanning bed or booth, or sunlamp. When UV rays reach the skin's inner layer, the skin makes more melanin. Melanin is the pigment that colors the skin. It moves towards the outer layers of

the skin and becomes visible as a tan.

A tan does not indicate healthy skin or good health. Tanned skin is a response to injury, because skin cells signal they have been hurt by UV rays by producing more pigment. Although everyone's skin can be damaged by UV exposure, people with sensitive skin and those who burn easily and tan very little are at the highest risk.

What are the signs of melanoma? Most melanomas have black or blue-black areas, but may appear as a new mole. It may be black, "ugly-looking" and abnormally shaped. The National Cancer Institute reminds us to think "ABCDE" to remember what to look for:

- Asymmetry- the shape of one half of the suspicious mole does not match the other half.
- Border- the edges are ragged, irregular or blurred.
- Color- the color is uneven and may include shades of black, brown and tan.
- Diameter- there has been a change in size, usually an increase.
- Evolving- the mole has changed over the past few weeks or months.

Surgery is the first treatment of all stages of melanoma. Prevention, however, is the best treatment. The National Institutes of Health (NIH) recommends to avoid/reduce exposure to direct sunlight, especially from 10 a.m. to 4 p.m., when the sun's rays are the strongest. Wear a wide-brimmed hat and clothing that protects the body from direct sunlight. Wear sunglasses that absorb UV radiation to protect the skin around the eyes. Apply sunscreen lotions with a sun protection factor



(SPF) of 30 or greater, reapply every two hours, and after swimming. It is important to use a broad-spectrum sunscreen lotion that filters both UVB and UVA radiation. Perform routine skin checks to monitor for changes in your skin. If you notice a mole that is changing or is concerning you, see your primary care provider for an evaluation.

There has been increased concern regarding Vitamin D deficiency in the news. Vitamin D is produced by the skin with UVB exposure. Some promoters of tanning have recommended tanning bed use to help produce Vitamin D. It is important to note that Vitamin D is produced with moderate exposure to UVB rays. Tanning lamps typically emit more UVA rays and fewer UVB rays. Vitamin D can be more safely obtained by eating a healthy diet and supplementation if needed. According to the CDC, indoor tanning is estimated to cause about 419,000 cases of skin cancer every year. For comparison, smoking is thought to cause about 226,000 cases of lung cancer every year.

Melanoma is the deadliest skin cancer, but early diagnosis gives the best chance for long-term survival. If you are interested in more information on melanoma, go to the NIH website and see the online booklet "What You Need To Know About™ Melanoma and Other Skin Cancers" to learn about melanoma symptoms, diagnosis, treatment, and questions to ask your doctor.



Post-retirement Weight Gain–Fact or Fiction?

By Claudia Drum, registered dietitian, U.S. Army Public Health Command

Do Army Retirees maintain healthier weights when compared to Civilian retirees?

Approximately half of the Army Retirees whose height and weight were measured at medical appointments in military treatment facilities last year had a body mass index that classified them as obese. Obesity rates for these Retirees are significantly higher than the general population of the same age. In addition, the rate of obesity among these Army Retirees is twice as high when compared to active-duty Soldiers.

BMI is a calculation of weight in relationship to height. Although it doesn't measure body fat directly, it is a fairly reliable indicator of body fatness for most people. A BMI greater than 30 is classified as obese and can lead to serious weight-related health problems such as heart disease, stroke, diabetes, cancer, and high blood pressure. Obesity can contribute to difficulty sleeping, breathing problems, decreased mobility, joint pain, and even depression -- all affecting your quality of life.

U.S. Army Public Health Command data estimates that Army Retirees may experience an average weight gain of four pounds during their first year of retirement. If this trend continues over the years, it may result in significant weight gain.

In addition to BMI, your waist circumference may provide a better predictor of disease risk.

A high waist circumference (greater than 40 inches for males and greater than 35 inches for females) or too much abdominal fat is one of five medical conditions that comprise "metabolic syndrome." This diagnosis (also known as Syndrome X) affects approximately 34 percent of the U.S. adult population and increases the risk of cardiovascular disease, heart failure, and diabetes. It is a disorder diagnosed by a co-occurrence of three out of the five following medical conditions: excess abdominal fat, high blood pressure, high blood sugar, high triglycerides, and low high-density lipid (HDL) levels. The likelihood of developing this syndrome increases with age.

What causes post-retirement weight gain?



Approximately half of the Army Retirees whose height and weight were measured at medical appointments in military treatment facilities last year had a body mass index that classified them as obese.

"It is most likely attributed to a combination of factors such as a decrease in physical activity or not adjusting caloric intake once you leave the military," said Lt. Col. Sandra Keelin, a registered dietitian at the U.S. Army Public Health Command.

Could it also be the fact that "Uncle Sam" isn't keeping tabs on you and testing your weight and physical fitness every six months? Your career progression no longer depends upon your weight or level of fitness. In addition, as you age, your body composition gradually changes as the proportion of muscle tissue decreases and fat tissue increases. This shift slows down your metabolism, making it easier to gain weight. Combine these two factors -- less physical activity and a slower metabolism -- with poor eating habits, and you create the perfect storm for promoting post-retirement weight gain.

You can prevent unwanted weight gain by committing to the development and maintenance of healthy lifestyle habits. A good place to start is the U.S. Army's Performance Triad, which focuses on three components of health: Sleep, Activity and Nutrition. The Performance Triad is all about getting back to the basics. Getting plenty of rest, adequate exercise and proper nutrition will help you live your life to the fullest. Take steps today to improve your health to get the most out of your retirement years.

- To find out more about the Performance Triad visit http://phc. amedd.army.mil/topics/healthyliving/ Pages/PerformanceTriad.aspx.
- For more information on calculating your BMI, visit the National Institutes of Health: http://www. nhlbi.nih.gov/guidelines/obesity/ BMI/bmicalc.htm.
- To measure your waist circumference: Use a tape measure. Start at the top of the hip bone, and then bring it all the way around, level with your navel (belly-button). Make sure it's not too tight and that it is parallel with the floor. Don't hold your breath while measuring.

It's All About Health.

BACH Brings the Healing Power of Planting to Fort Campbell

By Sgt. Eric Lieber, Fort Campbell Warrior Transition Battalion

"This is the first of its kind in Army Medicine" proclaimed Blanchfield Army Community Hospital (BACH) Chief of Nutrition Care, Lt. Col. James Pulliam, as more than 20 volunteers used pickaxes, post hole diggers, and shovels to break ground May 23 for a therapeutic garden at the Fort Campbell hospital.

After years of planning, Pulliam, BACH staff, and horticultural expert Dana Chango, set their plans in motion to create the first therapeutic horticultural program and garden at an Army medical facility. Pulliam explained that the garden was designed to provide a low maintenance, edible landscape that will provide wounded, ill, and injured Soldiers and their Families a place near the hospital where they can find serenity in therapeutic gardening.

Aaron Cornett, occupational therapy (OT) assistant with the Warrior Transition Battalion, said that the OT team offers Soldiers horticultural therapy at another garden near Fort Campbell's Werner Park and he has seen how therapeutic the activity can be.

"One Soldier came to us a little withdrawn," said Cornett. "We figured out that he really liked to garden and, once we got him in the dirt, he literally bloomed. He would come in and garden even on his own time. By the time he transitioned out of the Army, it seemed like he had successfully reintegrated back into the community."

"I think it's important for Soldiers to have a nice place to go and relax," said volunteer Sgt. Matthew Ellis, 1st Squadron, 33rd Cavalry Regiment, 3rd Brigade Combat Team, 101st Airborne Division. Ellis, who recently started a garden in his own backyard, said he felt it

was important to donate his time to help build the new hospital garden for other Soldiers after personally recognizing the benefits of gardening.

"It's just relaxing for me to do," said Ellis. "My Family comes out to help in the garden and they enjoy it too."

Not only will the garden be a place for Soldiers and patients to relax and heal, but nearly 80 percent of the healing garden will grow organic fruit and vegetable plants to be used in the hospital dining facility for patients, staff, and visitors.

are creating," said BACH commander Col. George N. Appenzeller. "Lt. Col. Pulliam and the volunteers here today will be remembered for helping to bring this healing garden to our hospital and the Fort Campbell community. This is what BACH is all about."

Pulliam explained that the healing garden embodies the Army surgeon general's Performance Triad of Sleep, Activity, and Nutrition.

Sgt. Arielle Cushionberry, the noncommissioned officer-in-charge of Blanchfield Army Community Hospital's clinical nutrition section, unloads plants at Fort Campbell for the Army's first healing garden located within a medical facility's footprint. (U.S. Army photo by Stacy Rzepka)

The BACH nutrition care division will also use the garden as an educational tool.

"During the past 20 years, processed food has become so common in this country that many people don't know where their food comes from," said Pulliam.

He explained that the garden will be a great way to teach patients where food comes from and educate them about the high nutritional value of fresh local produce.

"Think about the legacy of what you

"Sleep comes a little easier after a hard day of work. Gardening is a good source of activity and the nutrition pillar of the triad will be fulfilled as we incorporate these fruits and vegetables into our dining facility menu," said Pulliam. "In addition, we hope that this healing garden provides the community a centralized gathering place where people can come together to find peace and relaxation in the midst of a beautiful landscape."



Honolulu Police Department officers and Tripler Army Medical Center staff are photographed in May following a motorcycle safety class at Tripler Army Medical Center. (U.S. Army photo by Spc. Paxton Busch, Pacific Regional Medical Command)

Motorcycle Safety During the 101 Critical Days of Summer

By Spc. Paxton Busch, Pacific Regional Medical Command

In preparation for the 101 Critical Days of Summer and in honor of Motorcycle Safety Month, Honolulu Police Department conducted a safety class in May to raise awareness at Tripler Army Medical Center (TAMC). The training was open to all including current riders, potential riders, and those interested in more information on motorcycle safety. According to Sgt. 1st Class Kevin Edmondson, NCOIC Troop Command S3 at TAMC, the overall goal

of the training was to heighten awareness and help riders make smart decisions when they take out their motorcycles.

"We want to minimize and mitigate the dangers of riding. We not only have to watch out for ourselves, but also for the vehicles next to us," stated Edmondson.

This year so far, there have been a total of 18 motorcycle related fatalities, with 14 of those being noncommissioned officers (NCOs), and three of whom

belonged to MEDCOM according to the U.S. Army safety site.

"Teaching new riders proper motorcycle safety and better techniques should help with reducing the risk or possibility that our Soldiers show up on the preliminary loss report," said Edmondson.

Visit Tripler's facebook page for more information on quarterly safety training at the hospital. For more information on motorcycle safety visit safety.army.mil.

Farmers Markets Offer Healthy Choices to Soldiers and Families

By Jane Gervasoni, Public Affairs Office, U.S. Army Public Health Command

Suzi Gibson, a vendor at the Fort Meade farmers market, set out vegetable, herb, and flower plants and provided planting information for customers who wanted to grow their own gardens.

As part of the Department of Defense's Healthy Base Initiative, some military posts have introduced farmers markets to encourage healthy eating. These seasonal markets can offer locally grown fruits and vegetables, meats and

baked goods.

The U.S. Army Public Health Command (USAPHC) recognizes the possible health benefits of the fresh fruits and vegetables offered at these markets, but the USAPHC veterinary food inspection specialists also keep a close eye on the safety of the items sold.

Read the full article by Jane Gervasoni, USAPHC at army.mil/article/126622/



Suzi Gibson, a vendor at the Fort Meade farmers market, set out vegetable, herb, and flower plants and provided planting information for customers who wanted to grow their ownd gardens. (U.S. Army Public Health Command photo by Graham Snodgrass)



Army Veteran, Ana Manciaz

Army Veteran, Ana Manciaz shows off her mascot, a seal, after she finished her 10-mile cycling event during the Center for the Intrepid Mini-Try at Joint Base San Antonio-Fort Sam Houston May 22. More than 100 Wounded Warriors, Civilians and Retirees participated in the annual non-competitive sports event that put their physical endurance to the test. The event consisted of a 500-meter swim, 10-mile cycle ride, and a 2-mile run/walk. (U.S. Army photo by Robert Shields)

Air Force Staff Sgt. Meets Barkley

Air Force Staff Sgt. Daniel Fye with his dog Mary, talks with Charles Barkley, retired National Basketball Association player and current sports commentator, during Barkley's visit to the Center for the Intrepid May 20. Barkley, who came to San Antonio for the NBA playoffs, also made a surprise appearance to San Antonio Military Medical Center to visit inpatients and staff. (U.S. Army photo by Robert Shields)



Healing Music Reaches Fort Campbell Families



Nashville musicians Carol Ponder and her husband Richard Kiefer perform a portion of her father's memoirs at readers-theater-with-music for Soldiers and their Families at the Fort Campbell Soldier and Family Assistance Center May 15 during National Mental Health Month. As the daughter of World War II Veteran Lt. Herschel D. Ponder, who suffered from post-traumatic stress disorder, Ponder said that she has seen the healing effects of art after her father penned his memoirs. (U.S. Army photo by Sgt. Eric Lieber)

AMEDDC&S

The Workout Doesn't Stop Until the Recovery Begins By Lt. Col. John Ruibal, deputy director, U.S. Military Baylor University Graduate Program in Nutrition AMEDD Center & School

Ever wonder why your muscles seem to always be sore after your workouts? It could be that you are not properly refueling after your workouts.

Many times when you finish a workout, you get something to drink, cool down, maybe grab a shower, or jump in the car to go home, work or school. This can set your recovery back and you may not be refueled for that next workout. This can build over the week and if you do multiple workouts during the week, by Friday you are out of energy and fuel. So how do you make sure that you aren't running on empty between workouts?

Refuel with a recovery drink or food within 30 minutes after a workout and top off your tank over the next six hours eating carbohydrates and protein spread out every two hours. So how much should you consume during this six-hour window?

A good rule is to consume one gram of carbohydrate for every pound and one fourth of your weight in pounds as grams of protein. Another way to look at it is take your weight in pounds. This number is the grams of carbohydrates you should take in. Take the same

number and divide by four this is your protein requirement in grams. Here is an example for a 160 pound runner:

160 Pounds = 160 grams of carbohydrate

160/4 = 40 grams of protein Within the first 30 minutes post workout this runner should consume 30 – 50 percent of this requirement to benefit the most. In this example that would be 50 - 80 grams carbohydrates and 13 - 20 grams of protein.

Many of the commercial recovery drinks are right in this carbohydrate to protein ballpark. Examples of these include Recoverite, Endurox, and Muscle Milk. An old standard of mine is the original Slimfast which has 40 grams of carbohydrates and 10 grams of protein. A good friend of mine that is a top American Masters runner uses Ensure. Chocolate milk is another good recovery beverage as long as you tolerate dairy and lactose after a workout. The bottom line, this is the first phase of your nutrition recovery and the first 30 minutes is the most important.

Two or three hours later you should take in another 10 grams protein

and 30 – 40 grams of carbohydrates. This may sound like a lot of food but this meal would be a half a turkey sandwich and a piece of fruit, or a bowl of oatmeal and one egg. Finish the morning off with a light lunch. This may seem like a lot of calories but at four calories for a gram of carbohydrate and protein this complete morning comes in at 800 calories, add in 10 grams of fat, and the morning total still comes in at under 900 calories.

Having fresh fruit and vegetables available is another way to get high quality carbohydrates that are low in calories. Lean lunch meats are a good source of protein and at 7 grams of protein per ounce you only need a few ounces. Nuts are another good source of protein but again a small handful will get you the protein you need. If fresh fruits and vegetables, lean lunch meats, and nuts aren't available during your day, make sure you pack a small cooler to have them available for you to graze on. The bottom line: You have to refuel to reenergize. The first 30 minutes after the workout are important but you don't have to get all of your calories in that first half hour.



Saving Lives off the Battlefield

By Carl Norman, ASBP Blood Donor Recruiter, Fort Leonard Wood, Mo.

An old proverb says to really understand someone you have to walk a mile in his or her shoes. No one understands that better than Maj. Tawanda Harris, a student at Command and General Staff College, Fort Leavenworth, Kan. During a recent Fort Leonard Wood Blood Donor Center blood drive on the installation, Harris shed some light on why this way of thinking means more to her today than ever before.

Harris is recovering from two surgeries to remove four intracavitary uterine fibroids from her uterus and one subserosal fibroid from her endometrium. Uterine fibroids are noncancerous growths of the uterus. Medical experts say as many as three out of four women have them at some point during their lives, but most are unaware because they often cause no symptoms.

"I've been dealing with this issue for about two years now, not really knowing why I was extremely fatigued all the time," Harris said. "My doctors at my home post told me that many women have fibroids and that I wasn't experiencing anything outside of the norm."

To help solve the problem, Harris was given iron and birth control pills.

"To say the least, neither of those treatments helped," Harris said. "I realized that something was terribly wrong, and began to research uterine fibroids and their effects. Many of the symptoms – pelvic pain, severe anemia, and abnormal bleeding – were exactly what I had experienced. The location of my fibroids caused some rigorously damaging effects."

A few months after arriving at Fort Leavenworth, Harris felt drained and worn down; so she went to the doctor. Doctors at the Munson Army Health Clinic on Fort Leavenworth referred her to a civilian hospital. There, physicians ordered the standard array of blood tests and discovered Harris' hemoglobin level had dropped to five. Her doctors explained that the normal level for a non-pregnant adult woman is between 12.1 and 15.1 – five is what medical officials consider "critically low."

"That's when I received my first blood transfusion," Harris said, recalling that doctors sent her home after the transfusion was complete.

For the next few weeks, Harris continued her busy student-Soldier life and activities, still feeling out of breath and tired. So, she again went to the doctor who referred her to a specialist in Leavenworth, Kan.

"He prescribed an (intrauterine device), which fell out within one week," Harris said.

In December 2013, her condition worsened.

Taking no chances, Harris called the ambulance that took her to a local emergency room. Tests there saw her hemoglobin level drop to seven. She received her second blood transfusion and was admitted to the hospital for four days. She also received weekly iron infusions for two months.

"Class and daily activities seemed unbearable; however, I continued to push through," Harris said.

Fast forward to March 2014. She said when she got home from class one day she started losing blood clots the size of her hand and that lasted for about 30 minutes or more.

"I could hear my heart beating through my ears and I was afraid I could bleed to death," she said. "When I finally made it to the ER, my doctor told me my hemoglobin level was five and that I could die if my condition wasn't corrected.



Maj. Tawanda Harris shares how blood donations helped save her life. Blood donated to the ASBP does not just support service members injured on the battlefield.

Harris had the corrective surgery March 18 and again on May 2 to remove all uterine fibroids. "By this time, I had already received four blood transfusions," she said. Since then, she has adopted the "walk a mile" philosophy to her life, especially when it comes to blood donations.

"Before this condition, I had always given blood, but never gave serious thought about who would need it other than those injured on the battlefield," Harris said. "Being on the receiving end has changed my outlook tremendously. Blood donors saved my life! You may think you'll never need it; but trust me, it hits hard when that times comes. Just how important blood donors really are becomes real very quickly."

During the Fort Leonard Wood Blood Donor Center's visit to the Command and General Staff College, Harris and 120 of her fellow students donated blood. Harris said the Armed Services Blood Program is a prodigious, lifesaving program that everyone should support.

"The blood they collect is for military members and their Families in whatever situation necessary," Harris said. "It's not just for those injured on the battlefield, and I am forever grateful to have received their support."

ERMC

A Memory Lives On and Brings Peace to Families By Taylor Massey, Landstuhl Regional Medical Center Public Affairs

A new room stands by at Landstuhl Regional Medical Center designed specifically for patients nearing the end of their life's journey. These hospice patients now have a comforting environment where they can spend their last days with loved ones.

The Thomas Meehan Suite, named in memory of retired Marine Col. Thomas "Tank" Meehan, opened with a May 6, ceremony attended by Maria Fox-Meehan, the widow of Colonel Meehan.

Meehan, or "Tank" to all who knew him, impacted numerous lives during his military and federal service career and was known for making the best of every situation he faced. As residents in the Kaiserslautern Military Community, the Vietnam War Veteran and his wife were Red Cross volunteers who often visited staff and patients throughout the hospital.

The idea to develop a hospice suite came to fruition about two years ago when Mr. Meehan was diagnosed with cancer and Major (Dr.) Penelope Harris, a LRMC oncologist, helped the couple with their unsuccessful search for hospice care on the local economy. As a result, Ms. Meehan said her husband was required to fly on a medical evacuation flight to Washington D.C. where they faced numerous difficulties seeking care for his essential needs. Now, The Thomas



LRMC Commander Col. Judith Lee presents Maria Fox-Meehan with a handmade quilt of valor during the dedication ceremony of The Thomas Meehan Suite. (U.S. Army Photo/Phil A. Jones)

Meehan Suite is able to provide patients and Families with those needs in a calm environment as they near the end, and relieve the stress of trying to plan a way back to the states during such a difficult

The Fisher House Foundation provided financial funding to turn the idea of the hospice suite into a reality. Vivian Wilson, manager of the Landstuhl Fisher Houses, who knew the Meehans and of their difficulties, said she felt the need to "provide stepping-stones to establish a positive outcome from the negative situation." Ensuring the room came to fruition, Wilson said, involved key support from Ms. Meehan, former LRMC commander Brig. Gen. Barbara

Holcomb, current LRMC commander Col. Judith Lee, deputy commander for Nursing Col. Kathy Prue-Owens, and Lt. Col. Cheryl Creamer.

Ms. Meehan said she believes the hospice suite will have an extremely positive impact on its patients and their Families. The hospice suite enhances the feeling of being home in an actual bedroom. It doesn't have medical equipment surrounding the bed, but patients are still able to have their doctors and medical team close and available when needed. Ms. Meehan said this is an important factor toward the end due to the emotional and physical drain patients and their loved ones often experience.

Landstuhl Color Guard Participate in Ceremony

Color Guard members from Landstuhl Regional Medical Center, Germany, participate in a ceremony May 17 in Wereth, Belgium, honoring 11 African-American Soldiers murdered during World War II. A ceremony has been held on the location of the murders since a memorial site was created in 1994 by the son of the farmer who aided the Soldiers. Learn more at wereth.org (U.S. Army photo by Taylor Massey)



MRMC

Burn Survivor Inspires Through Paintings, Views

By Steven Galvan, USAISR Public Affairs Officer

"Who? Who am I? Yesterday's gone. Today's today. Tomorrow's another day. So why worry? Only time will tell who I am."

That is a phrase created by burn survivor and artist Lupe Munoz and words that he lives by every day. It's that positive spirit that helped Munoz overcome the hardships of a serious gas explosion more than 36 years ago. Munoz endured 55 surgeries during a year-long stay at the U.S. Army Institute of Surgical Research Burn Center in 1976 after a butane-filled hole he was working in exploded, burning 65 percent of his body.

"I was down 20 feet and had to climb a ladder to get out," he said.

Munoz was conscious throughout the entire ordeal. While being transported to a hospital in Lubbock, Texas, he was able to see how charred the fire had left him, confirmed by the looks of dismay from his co-worker, who was at the top of the hole and had also been burned.

"I knew I was going to die," said Munoz. "When I got to the emergency room, the doctors asked me who I would like to call because things weren't looking good for me. I said my mom."

Munoz made what he thought was going to be the last call to bid farewell to his mother.

"I told her that I had gotten burned in an explosion and it was probably going to be the last time I talked to her," he said.

After a three-day stay at the hospital, Munoz was transported to San Antonio, Texas, on a helicopter for specialized burn care. During his stay at the burn center he passed the time coloring with crayons. Coloring and drawing were things he had always enjoyed as a child. Little did he realize that this would be the start of a new career.

In 2009, a friend introduced Munoz to an art program offered at the Salvation Army. In this program is where his artistic passion and talent truly emerged. Since then, Munoz has sold numerous paintings – an accomplishment which has surprised him.

"I never imagined it would get to this," he said.

Despite his disfigured hands, Munoz has created inspiring paintings that caught the eye of a newspaper reporter who wrote and had the story published in the San Antonio Express News. A staff member at the Burn Center read the inspirational story which gave him an idea.

"Obviously he has overcome his circumstance," said Lt. Col. Paul Mittelsteadt, Burn Center chief of nurses. "That led me to think that we [Burn Center] had a record number of burn center nurses submit scientific posters about performance improvement initiatives to the American Burn Center Association Annual Meeting recently and wanted to 'show them off' [during National Nurses Week]. Displaying those alongside Mr. Munoz's art, shows how nursing innovations impacts patients who then enrich our lives."

Munoz accepted the invitation and shared his views on life and his talent as a painter by displaying 10 of his paintings at the Burn Center during the 2014 National Nurses Week observed at the San Antonio Military Medical Center at Joint Base San Antonio-Fort Sam Houston, Texas, May 6-12.

"He is amazing," said Sarah Zayas, Burn Center physical therapist assistant. "It was an honor meeting and talking to him."

Munoz's take-home message is simple: Despite what life throws at you, you have to stay positive.

"Everything eventually falls into place," he says, "and when the time comes, whatever you are doing at that time is who you are."



Burn survivor Lupe Munoz has his paintings displayed at the Burn Center during National Nurses Week May 6-12.

NRMC

Burn McDonald Army Health Clinic Paramedics Remain Ready to Answer Fort Eustis' Call

By Senior Airman Teresa J.C. Aber, 633rd Air Base Wing Public Affairs

Sirens blare as a team of paramedics rush to a man who's lying on the ground. They take his vitals and begin administering CPR as others nearby watch in horror. The lifesavers ignore the crowd of onlookers and continue, only paying attention to the man in their care. The only thing that matters in that moment is saving a stranger's life.

McDonald Army Health Center (MCAHC) paramedics respond to all 911 calls at Fort Eustis, Va., regardless of the individual's military status. On average, the team answers 67 calls each month, including transfers to and from the medical facilities in the surrounding community.

"We don't have an emergency room at Fort Eustis, so it's important to get to the patient as quickly as possible and take them to a nearby facility," said

Dawn Smith, MCAHC paramedic intermediate. "Depending on how critical the injury is, we take most patients to Mary Immaculate Hospital or Riverside Regional Medical Center



McDonald Army Health Center paramedics respond to all 911 calls at Fort Eustis, Va., regardless of the individual's military status. On average, the team answers 67 calls a month, including transfers to and from medical facilities in the surrounding communities. (U.S. Air Force photo by Senior Airman Teresa J.C. Aber)

because they are the closest."

The team of paramedics' experience ranges between 17 to 50 years, but they know they can't do it all alone. They encourage Fort Eustis community members to take first aid and CPR classes if they have the opportunity because they can help sustain life until the paramedics arrive.

"Even when everything is done correctly, you've only got a short window to save a life," said Raphael Ramos, MCAHC ambulance section supervisor.

"[Performing] CPR will keep blood flowing to the heart, brain and throughout the body, sustaining life until an AED, or other advanced medical care is available."

While a call for a heart attack may not be an everyday occurrence, the MCAHC paramedic team remains ready to answer any call.



Tripler Army Medical Center Hosts Simulation Center Open House

By Ana Allen, Pacific Regional Medical Command

Tripler Army Medical Center (TAMC) hosted an open house for its Medical Simulation Center May 27, to highlight advanced technologies available to medical interns, residents, and staff.

The interactive training tools are used as part of continuing education and training requirements.

Ruth Andrews, TAMC Simulation Program administrator says the event is a perfect opportunity to show the community advanced technologies that help to reproduce as close to reality environments and situations that enhances staff knowledge and ultimately, the patient's experience.

"What's really great about simulation is that you can repeat scenarios as many times as you want without having to touch an actual patient. Staff can practice doing procedures that range from lumbar punctures to something as simple as an ultrasound. Spending time in the simulation center sharpens their skills and the patient benefits from that because their medical staff has more experience," says Andrews.

Brig. Gen. Dennis Doyle, command general for Pacific Regional Medical Command (PRMC) and Tripler Army Medical Center (TAMC), along with Capt. Andrew Findley, TAMC deputy commander of clinical services, were on hand for the event and interacted with systems to include a fundamentals of laparoscopic trainer system. This system allows surgical residents and practicing surgeons to develop psychomotor skills and dexterity required in basic laparoscopic surgery, as well as a high fidelity virtual reality trainer for the da



Brig. Gen. Dennis Doyle (right), command general for Pacific Regional Medical Command (PRMC) and Tripler Army Medical Center (TAMC) along with Capt. Andrew Findley, TAMC deputy commander of Clinical Services interact with a fundamentals of laparoscopic trainer system that allows surgical residents and practicing surgeons to develop psychomotor skills and dexterity required in basic laparoscopic surgery skills during an open house for the Medical Simulation Center at TAMC on May 27. (U.S. Army photo by Ana Allen)

Vinci surgical robot.

Also on display was the "NOELLE," a high fidelity delivery manikin that can blink, breathe, and is warm to the touch. The Robot is used for competency based programs where realistic fetal palpitations, multiple birthing scenarios, epidural procedures,

and more can be simulated and controlled while devices track student actions.

The center supports Tripler's Graduate Medical Education program. Tripler is a major teaching center that sponsors 13 physician training programs with over 220 resident positions.

SRMC



Dr. (Col.) Eric D. Martin, chief of vascular surgery at Eisenhower Army Medical Center, completes a surgical procedure on a patient, Diane Scarf, utilizing stem cells and placenta at EAMC, Fort Gordon, Ga. (DoD Photograph by Joe Smith, Red Cross Volunteer Medical Photographer)

Healing Wounds: Advanced Therapy Thrives at Medical Center

By Wesley P. Elliott, EAMC Public Affairs

When Diane Scarf's sister developed cancer, she watched her struggle through chemotherapy and a double mastectomy and Scarf knew she was at a high risk for breast cancer herself.

She had several fibrous tissues in her breasts over the years and felt it was just a matter of time.

"I saw what my sister had to go through and it was one of those, do I do this now and not get it or continue playing Russian roulette with cancer," said Scarf.

Discussing her double mastectomy, "people just don't get that it's an amputation, it's hard for women to get their breasts removed and on top of that, I was one of those people where something went wrong and the wound didn't heal properly."

Following the double mastectomy, an infection began around the incisions and the surgeon brought in Col. Eric D. Martin, chief of Vascular Surgery at Eisenhower Army Medical Center (EAMC) Fort Gordon, Ga., to examine the incision and the surrounding area that had turned dark.

"Wound care clinics, like the one at EAMC, specialize in helping patients heal difficult wounds," said Martin.

Most wounds heal with the standard medical treatment but wounds that have been present for more than 30 days, despite standard wound care, may require more specialized treatment. The typical wounds treated by a clinic would include diabetic foot wounds, leg wounds from restricted blood flow, and pressure sores.

According to Martin, "the most important thing to remember is that it is the patient that heals, not the wound. Treatment is tailored to individual medical conditions and may include a combination of education, infection control, and nutritional evaluation as well as specialized wound care dressings and bioengineered skin substitutes."

With Scarf, new and innovative treatments were needed to address the infection and the skin flap necrosis caused by reduced blood flow to the tissue.

Scarf describes that each week, she went to the hospital and they used stem cells to heal her incisions. Martin would clean the wound and fill it with

SRMC

Healing Wounds

a putty like substance made with stem cells and for the last two procedures parts of a placenta was implanted to help regrow the muscle tissue that had deteriorated.

"Everything doctor Martin and his team did for me was amazing, it was a lot of every Thursdays and the treatments were almost three hours but he pulled me through and got me to where I am today."

Scarf explains that for each treatment, Martin would open the incision and go in to clean inside, like someone was power washing a house. There was a little laser that would cut away dead tissue and then they would spray a disinfectant.

"They would mix up this paste of stem cells that they would pack inside the incision and it would stay for a week. Then they would clean and repack it again."

Martin explains that there are a few types of human tissues that are regenerative including the liver and the placenta. "These can be used to regenerate chronic wounds in patients."

The stem cell therapy that Martin uses works by stimulating the growth

of new blood vessels to increase blood flow to the wound and by using the stem cells to invite healthy cells from the surrounding tissue into the wound.

"The technology to inject stem cells with other growth factor products into the wound bed has only been out for a year and a half and we are the only DOD facility to use this type of medicine to treat chronic wounds," said Martin.

"Five years ago, wounds like hers would have taken 3-4 times as long to heal and would have been referred out to another hospital."

"The nurses, and doctor Martin, and the people who assisted him in the surgery, were all just great. Doctor Martin and his team went well above and beyond what I needed."

Since both incisions have healed completely, she will now begin physical therapy to build up muscle strength because her pectoral muscle had deteriorated from the infection and the muscle had to be regrown.

"I have pretty good movement but it's not 100 percent of what it should be, so it will take a little physical therapy to get those muscles to loosen up and build strength," said Scarf.

Martin states that, "in Diane's case we didn't use hyperbaric medicine but this can help treat necrosis and we have had very good results with that."

EAMC's wound care clinic includes a multiplace hyperbaric chamber where a patient can breathe 100 percent oxygen either by face mask or an oxygen hood in a compressed air chamber.

It is the only clinical hyperbaric chamber in the U.S. Army, the only multiplace chamber in the Central Savannah River Area, and can seat up to 12 patients at the same time and an attendant.

"We have treated dozens of patients, helped to save limbs, treated radiation induced necrosis following cancer surgeries, reconstructed chest walls following sternal infections, closed colocutaneous fistulas with the use of hyperbaric medicine and regenerative medicine," said Martin. "We have developed a state of the art wound care practice at Eisenhower and I would like the community and our patients to know about it."



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Your comments may be published in a future edition of the newsletter.

USAPHC

Medical Cost Avoidance Model Demonstrates Value of Prevention

By Jane Gervasoni, U.S. Army Public Health Command

The U.S. Army Public Health Command agrees with Ben Franklin that "an ounce of prevention is worth a pound of cure." This is especially true when it comes to preventing disease, injury, and disability to active-duty Soldiers.

As budgets shrink, it is more important than ever to demonstrate the health impacts of new military equipment or modifications to current equipment, but this requires objective data to make informed decisions. The USAPHC Health Hazard Assessment (HHA) Program has developed the Medical Cost-Avoidance Model (MCAM) -- a series of tools that can help demonstrate the cost of failing to prevent adverse health consequences.

The HHA Program addresses the potential effects of materiel systems health hazards on the personnel who operate and maintain the systems. As part of the program's assessments, the USAPHC is using this new, data-driven tool.

"The Medical Cost-Avoidance Model can estimate avoidable acquisition life cycle medical costs resulting from the elimination or control of health hazards," explained Cindy Smith, industrial hygienist with the HHA Program. "It relates the medical cost factors that are attributed to health hazards to better justify methods of their elimination or control."

"Mitigating health hazards early in the acquisition process is usually less costly than waiting until later in the process," explained Timothy Kluchinsky Jr., HHA Program manager. "Having a return-on-investment tool available to justify and prioritize mitigation strategies allows materiel developers to make more informed decisions on the materiel being designed."

Health hazards are often inherent in Army materiel and may cause injury or illness at any point in the acquisition life cycle, according to Kluchinsky. If injuries occur, medical treatment costs pose a considerable financial burden to military and Veteran healthcare systems, and the resulting lost time degrades productivity and unit readiness.

"Various health hazard types including chemical and biological substances, acoustic and radiation energy, vibration, shock, trauma, and temperature extremes can be evaluated using this model," said Kluchinsky, who holds a doctorate in public health. "The Medical Cost Avoidance Model gives commanders and project management offices a risk-based severity and probability tool designed to estimate the return on investment associated with incorporating mitigation recommendations published in health hazard assessment reports."

"USAPHC health hazard experts assess new or improved materiel by evaluating: types of hazards that exist; injuries or illnesses likely to result from the hazards; level of risk for each hazard; and corrective actions needed to eliminate or control the hazards," explained Smith. "Our health hazard experts report this information to the materiel program management offices responsible for the development and life cycle management of the materiel system."

As part of their assessment, the HHA Program uses the MCAM to predict future health hazard costs based on data from the Military Health System and the Veterans Benefits Administration.

"The primary MCAM function is its

ability to estimate total system-related medical and lost-time costs, using the cost factors of lost time, disability and fatality. The MCAM provides a return-on-investment model that is a way of comparing profit or loss to the amount invested," said Smith.



The Medical Cost Avoidance Model (MCAM) demonstrated the cost avoidance in medical treatment, lost time, and disability by implementing recommendations to reduce a Soldier's exposure to health hazards such as impulse noise. The MCAM estimated total medical cost avoidance of almost \$4.5 million by lowering the risk of impulse noise hazard to a mortar team over the life cycle of the 81mm mortar (20 years).

This ability to project return-oninvestment can be a vital tool to acquisition managers according to Kluchinsky.

"The MCAM tool is available on the USAPHC public Web site," said Kluchinsky. "It provides hazard analysis and predicts medical and lost-time costs based on actual Army medical records.

"The MCAM provides the means to optimize and articulate the return on investment (avoidable medical, lost-time, disability, and fatality costs) important to occupational health, preventive medicine, and safety-related investment decision making," he said.

The Medical Cost Avoidance Model is available at: https://usaphcapps.amedd.army.mil/mcam

WRMC

Staff Members at Medical Department Activity – Alaska are a Little Healthier Now Than They Were 13 Weeks Ago

Thanks to the Healthy Lifestyle Challenge Held by MEDDAC-AK's Eat, Sleep, Move Committee By Brandy Ostanik, Bassett ACH PAO

The committee, chaired by Lt. Col. Robert Holcek, assistant deputy commander for nursing, meets weekly to create activities that promote the Performance Triad, an initiative brought forth by the Army Surgeon General, Lt. Gen. Patricia D. Horoho. The Performance Triad focuses on the importance of getting eight hours of quality sleep a night, eating at least eight servings of fruits and vegetables per day, and incorporating activity into the daily routine. Exercise goals consist of at least 150 minutes of moderate or greater intensity aerobic exercise per week, resistance training of all major muscle groups at least two or more days per week, and taking at least 10,000 steps per day.

The Healthy Lifestyle Challenge was a 13-week competition designed to help motivate employees to use the Performance Triad recommendations of healthier eating, exercise, and quality sleeping habits to improve their overall health.

In all, 102 staff members registered for the event that began Feb. 3 and ended May 3 and each of those paid \$10 towards prizes which were awarded to the three contestants that lost the largest percentage of body fat.

Each week, participants would weighin and then have their body fat calculated using a body fat loss monitor which measures body mass index and body fat percentage.

The event was not just about losing weight however, participants received a newsletter throughout the challenge with healthy recipes, tips on getting better sleep, and different activities they could participate in throughout the community. Participants also could



Sgt. Nathan Hopkins, noncommissioned officer in charge of hospital education for Medical Department-Activity – Alaska, looks on as June Moore, industrial hygienist, weighs in after 13 weeks of participating in the Healthy Lifestyle Challenge at Bassett Army Community Hospital. Moore was the grand prize winner of \$500 for losing 29.68 percent body fat during the challenge that centered around the Performance Triad principals of making healthier food choices, creating time for activity, and getting quality sleep. (U.S. Army photo by Brandy Ostanik, MEDDAC-AK PAO)

attend short seminars with topics such as benefits of healthy lifestyle changes, tips on incorporating the Performance Triad into the entire Family routine, and motivational encouragement.

At the end of the challenge, participants and supporters gathered for an awards ceremony and to share their successes.

Dr. Jennifer Mathieu and husband Dr. Ross Mathieu were awarded third and second place for their decrease in body fat percentage of 24.37 percent and 27.68 percent respectively.

The Mathieu's worked to ensure they walked a minimum of 10,000 steps a day and wore devices to help track those steps.

"When I would see Ross on the treadmill I knew I needed to find time too. Doing it together was definitely motivating," said Jennifer.

The grand prize winner was June

Moore, industrial hygienist for MEDDAC-AK, with a loss of 29.68 percent body fat. Moore used a calorie counter on her phone and worked in two, 15-minute Pilates sessions during her day.

"I had a baby 10 months ago," said Moore. "This challenge was a great motivation for me to lose that weight and then some."

Holcek believes the challenge was a great success.

"This was about staff members making a positive change for their future health. We had four staff members lose at least 30 pounds, two who lost over 20, and four that lost more than 10. That's great for a 13-week challenge."

For more information on the Performance Triad go to http://phc. amedd.army.mil/topics/healthyliving/ perftriad/Pages/default.aspx



Mother of Deceased Soldier Writes Letter of Appreciation to U.S. Army

By Warrior Transition Command Public Affairs

Sgt. Fred Prince, an inspirational Army Soldier and Warrior Games medalist, passed away in May 2013 from an acute form of leukemia, known as AML.

A few months after he passed, his mother, Cindy Prince, wrote a letter to the U.S. Army expressing her gratitude for the support and kindness her Family was shown throughout his recovery at what is now Joint Base Lewis-McChord Warrior Transition Battalion (JBLM WTB), formerly Fort Lewis WTB.

When Sgt. Prince was diagnosed with AML in 2011, his blood was 90 percent cancerous, and he was not expected to live more than a few days. He lived two more years.

During his miraculous recovery, Sgt. Prince joined the JBLM WTB, becoming an active participant in adaptive sports and reconditioning.

Ms. Prince writes, "It was Fred's desire that his efforts would demonstrate his recovery and ability to return to the fight and continue his commitment to the Army, possibly even as a member of Delta Force. He learned mountain climbing and horsemanship, ran the Seattle Half Marathon, learned scuba diving, and took part in archery and air rifle programs to name just a few."

Sgt. Prince represented the Army at the 2012 Warrior Games in Colorado Springs, Colorado.

"Fred won the silver medal in both archery and air rifle to the delight of his battalion leadership, Lt. Col. Wing, Command Sgt. Maj. Gilmore, and



Capt. Carney who attended the games to express their support for Fred. I attended those games, along with my mother, to show the Family support and the tremendous gratitude we all felt for Fred's amazing recovery and toward his leadership for their strong backing," noted Ms. Prince.

Ms. Prince spoke highly of Lt. Col. Jeffery Mosso, his nurse case manager, Vicky Fry, and other staff and military personnel at the JBLM WTB for their continual support.

"He was loved by all and held in high regard for the encouragement he was to his fellow Soldiers in the WTB. His nurse case manager, Vicky Fry, loved him like her own son. Kim Drown, who headed many of the recovery programs, greatly appreciated the tremendous help he was to her and the program. Fred helped and encouraged Soldiers in every way possible to take advantage of the many opportunities available to them through the program, inspiring them to overcome their own limitations. He was considered the poster boy for the program, though he tried hard not to be in the limelight."

After Sgt. Prince passed, Ms. Prince wrote that her contact with the military and her son's unit eased the burden of matters that needed to be attended to.

"Fred's leadership and cadre and Civilian staff came forward with great support for the entire Prince Family. I was particularly impressed that Lt. Col. Mosso, who had just taken over heading the JBLM WTB, came out to our house along with his wife Katie, bringing containers of wonderful food and to offer their condolences and meet the Family."

Ms. Prince closes her letter by adding, "Please accept this as a token of my sincere, heartfelt gratitude, and appreciation to all who knew and came to love and admire Fred as well as to those who never knew him yet extended a hand to me and my Family in friendship and kindness."

To view the letter and see photos of the Prince family, visit the Warrior Transition Command website at http://www.wtc.army.mil/letter_of_appreciation_to_USA.html

RECOGNITIONS ****

AMEDD Officers Graduate from Senior Service Colleges

By Lt. Col. Lindan A. Moya, Ph.D., Army War College Public Affairs

Attending a senior service college such as the Army War College or National Defense University may not be a top-of-mind concern for many Army Medicine officers, but those at senior service colleges now say that it's a great opportunity for those who want to expand their knowledge of strategy and progress in their career.

For academic year 2014, 20 Army Medicine officers were students in one of the senior service colleges or participated in the Army War College fellows program. Officers in the fellows program participate in a unique 10-month program that places them at various universities, allied service schools, civilian "think tanks," corporations, and government agencies. There were seven Army Medicine officers in the Army War College resident class of 2014 that graduated June 6.

Col. Kerrie J. Golden, who holds a doctorate in physical therapy, has been one of the Army War College fellows at the Department of Veterans Affairs. "I have learned a great deal about the complexity of interagency relationships - looking at things from a different perspective - a much more strategic viewpoint," said Golden. A fellowship is a great opportunity to jump into meetings, go to think tanks, and investigate all different kinds of learning opportunities in the D.C. area, she said.

"Effective leaders never stop learning," said Lt. Col. Steve Greiner, a veterinarian, who attended the Army War College in Carlisle, Pa. and found that it's important preparation for the challenges of his next assignment as chief of staff for Northern Regional Medical Command.

"If you want to be a relevant and effective leader for Army Medicine operating in the joint, interagency, intergovernmental and multinational environment, you need to attend a senior



Army Medicine's U.S. Army War College 2014 graduates (From left), Lt. Col. Clifford Gehrke, Lt. Col. James Burk, Lt. Col. Teresa Brininger, Col. Deydre Teyhen, Col. Steven Greiner, Col. Gary Wheeler (not pictured, Lt. Col. Roberto Nogueras)

service college," said Greiner. The Army War College has the highest number of international fellows, contributing to an exceptionally robust global strategy perspective. The War College refreshes its curriculum and experiential opportunities regularly, like the addition of an oral comprehensive exam, to help the student become a strategic-thinking leader who is immediately valuable in their next assignment.

Col. David Gibson, a medical logistician, graduated from the Dwight D. Eisenhower School for National Security and Resource Strategy June 12. "It has a core curriculum that includes military strategy and logistics, strategic leadership, national security strategy, industry analytics, acquisition, and the international comparative business environment," he said.

"Personally, I was interested in the healthcare and supply chain management track and chose the financial services industry study. The curriculum, exposure to senior leaders from the U.S. and other governments, and opportunities to meet with high-level industry officials made the overall experience priceless.

"The DOD is facing key challenges regarding force structure, readiness, and

modernization as a result of precipitous cuts due to sequestration and the Business Case Analysis Policy. Although we don't know exactly how that balance will be achieved or what specific systems, platforms, or medical technologies will be used in the future, many of the leaders that will live with the consequences of today's decisions are in our ranks now," said Gibson who was recently recognized as a distinguished graduate of the Eisenhower School. "Therefore, investing in their development is one effort we can pursue that is certain to shape the future environment."

AMEDD officers interested in strategic-level opportunities for professional development can start early by applying for the Company Grade Strategic Broadening Program, as well as the online Defense Strategy Course, for majors and lieutenant colonels, both offered by the Army War College. Lieutenant colonels and colonels may apply for admission to a senior service college or fellowship all of which are highly competitive and designed to produce graduates who are skilled critical thinkers able solve complex problems at the senior most levels of the military.

DUSTOFF Hall of Fame Unites Vietnam Veteran, Army War College Student

By Col. Brian Bisacre, Army War College

United States Army War College Class of 2014 student, Col. Pierre Gervais, introduced and presented World War II Veteran and retired Chief Warrant Officer Thomas "Hoot" Gipson Jr. into the DUSTOFF Hall of Fame at a ceremony held April 2014 in San Antonio, Texas.

The DUSTOFF Association is an organization for all officers and enlisted Army Medical Department personnel, aviation crewmembers, and others who are, or ever were, engaged in or actively supported in any capacity, Army aeromedical evacuation programs in war or peace. Each year, at a ceremony in San Antonio, Texas, the association inducts members who demonstrated extraordinary sacrifice and rose above others in the performance of DUSTOFF operations.

Gervais and Gipson became close friends three years ago while Gervais was commanding the 470th Military Intelligence Brigade based at Fort Sam Houston in San Antonio. Through their friendship, Gervais learned of the great accomplishments of Gipson during his

time in DUSTOFF, which spanned across two extended tours in Vietnam. While evacuating 2,639 U.S. Military, civilians and enemy combatants over 935 combat missions, Gipson earned the Silver Star, five Distinguished Flying Crosses, Bronze Star, Army Commendation Medal with Valor, four purple hearts and 38 air medals. Gervais realized his new friend was a hero in the DUSTOFF community and represented all the criteria for induction into the prestigious Hall of Fame. Gervais nominated Gipson for the Hall of Fame and on April 12, Gipson was honored by his friend and the association by being inducted into the DUSTOFF Association Hall of Fame.

In front of hundreds of friends, Family members and former and current members of the DUSTOFF Association, Gervais spoke of Gipson as a warrior stating, "A warrior is someone with that undying spirit...an unending willingness to get across the finish line -- no matter the cost. Tom "Hoot" Gipson was a warrior in Vietnam and has always been a warrior



DUSTOFF pilot retired Chief Warrant Officer Thomas 'Hoot' Gipson Jr. (left) with Col. Pierre Gervais in San Antonio, Texas, April 2014

for this nation." Gipson on receiving the honor thanked Gervais stating the two of them have formed a special bond that spans across the generation of Vietnam Vets and the current generation of combat Veterans. Gipson was humbled and honored to have his name placed on the Hall of Fame wall and his friend Gervais was proud to see his friend receive his long overdue recognition as one of the elite members of the DUSTOFF community.

Gibson Awarded for Excellence in Research and Distinguished Graduate at Eisenhower School

By Army Medicine Public Affairs

Col. David Gibson, who will take command of the United States Army Medical Materiel Agency (USAMMA) at Fort Detrick, Md., this July, is the recipient of the USA Association of the Industrial College of the Armed Forces (ICAF)/Eisenhower School Award for Excellence in Research for his paper on Cost Containment in the Military Health System (MHS). Additionally, Gibson was recently recognized as a Distinguished Graduate of the Dwight D. Eisenhower School for National Security and Resource Strategy (Eisenhower School) (formerly

ICAF). Gibson is one of six Army students to be recognized with this distinction which is awarded to the top 10 percent of the student body of the Eisenhower School, and is a rare distinction amongst Army Medical Department (AMEDD) officers at a war college. The Eisenhower School prepares selected military and civilians for strategic leadership and success in developing our national security strategy and in evaluating, marshalling, and managing resources in the execution of that strategy.



Col. David Gibson, a distinguished graduate of the Eisenhower School.

RECOGNITIONS ******

Porter Becomes Third Medic in History to Receive Tomb Badge

By Army Medicine Public Affairs

After months of intense training, Sgt. Luke Porter, HHC, 4th Battalion, 3d US Infantry (Old Guard), became the 623 recipient and third Army Medic to receive the Tomb of the Unknown Soldier Identification Badge since it was first issued in 1958.

Sgt. Porter hails from State College, Pa. The Guard, Tomb of the Unknown Soldier Identification Badge is the second-least awarded badge in the U.S. Army, after the Astronaut Badge. The Tomb of the Unknown Soldier (TUS) holds the unidentified remains of Soldiers from World War I, World War II and the Korean War. Tomb Sentinels guard the TUS 24 hours a day, 365 days a year despite any weather condition at Arlington National Cemetery, Va. The precision of this elite platoon is witnessed by more than three million visitors a year who come to watch the changing of the guard at the TUS.

The 3d U.S. Infantry Regiment (The Old Guard) conducts memorial affairs to honor our fallen comrades, ceremonies,



Sgt. Luke P. Porter, Tomb Sentinel, Tomb of the Unknown Soldier, 3d U.S. Infantry Regiment (The Old Guard), receives the Tomb of the Unknown Soldier Identification Badge during a badge ceremony inside the Memorial Amphitheater in Arlington National Cemetery, Va., June 9, 2014. Porter received badge #623 and is the 3rd medic to receive the Tomb of the Unknown Soldier Identification Badge. (U.S. Army photo by Spc. Cody W. Torkelson)

and special events to represent the Army, communicating its story to our Nation's citizens and the world. On order, the regiment conducts defense support of civil authorities in the National Capitol Region.

See video footage of Sgt. Porter's Tomb Badge Ceremony at: http://www.dvidshub. net/video/342009/sgt-porter-tomb-badgeceremony

Congratulations 2013 Professional Medical Logisticians' Leadership and Civilian Award Recipients

Army Medical Command is pleased to recognize the recipients of the CY13 Professional Medical Logisticians' Leadership and Civilian Awards. These recipients have clearly demonstrated exceptional leadership skills, technical competence, professionalism, and customer service in the medical logistics field. Their hard work and diligence help us provide combat casualty care, enable the readiness and health of the force, maintain a ready and deployable force, and provide for the health of our Families and Retirees. Our greatest asset will always be our Military and Civilian teams working together. It is because of teamwork like this that Army Medicine will be a force multiplier as we continue to transition to a System for

Health, setting the standard for our Nation.

Congratulations to these honorees,
and thank you again for all you have
contributed.

CY13 Professional Medical Logisticians' Leadership Awards:

- Medical Service Corps Officer –
 Maj. Aaron Northup, Supply Chain
 Management chief, Landstuhl
 Regional Medical Center, Landstuhl,
 Germany.
- Health Service Maintenance Technician

 Chief Warrant Officer 3 Deanna
 Swords, chief of Healthcare Equipment
 Management Branch, Tripler Army
 Medical Center, Hawaii.
- Biomedical Equipment Technician –

Staff Sgt. Justin Vanhoy, NCOIC Of Customer Support, U.S. Army Medical Materiel Center Southwest Asia Assigned to the 6th Medical Logistics Management Center, Fort Detrick, Maryland.

CY13 Professional Medical Logisticians' Civilian Awards:

- Edwards Grantham, deputy chief Customer Support Division, United States Army Medical Materiel Center-Europe, Pirmasens, Germany.
- Karl Busch, Army's senior service representative for the Defense Medical Logistics – Enterprise System, G-46, Office of The Surgeon General, Fort Detrick, Maryland.

RECOGNITIONS ******

Rousaynes Selected Military Family of the Year

By Cindy Kronman, USAMRICD Information Management Office

The family of Spc. Cassandra Rousayne, a medical laboratory technician at the U.S. Army Medical Research Institute of Chemical Defense (USAMRICD), was voted the 2014 Aberdeen Proving Ground Military Family of the Year. Rousayne, her husband, Heath, and their two daughters, eight-year-old Skylar and three-year-old Cameron, were recognized on May 15 at the Military Appreciation Week Luncheon, sponsored by the Harford County Chamber of Commerce and the Military Affairs Committee of Maryland.

"We were honored of course," Rousayne said. "In our position, we don't serve and do things for recognition, so it's humbling, especially when you think of everyone else who is deserving of this award. It's just a way of life for us, and it's nice for the girls to learn to serve and to be recognized."

As a couple, they volunteer at their church, ushering, manning the nursery, and helping out at church-sponsored events. Additionally, both are very involved with their daughters' sports teams, serving as coaches, assistant coaches, and team manager.

As a Family, they perform in Easter and Christmas plays that their church puts on

at Harford Senior House, and during the Christmas holidays, they gathered toys and gifts to be sent to children in need overseas and to deliver to the Upper Chesapeake Pediatric Unit. The Rousaynes also planned and executed the delivery of baked goods to local first responders who were working on the Christmas holiday.

Rousayne's volunteerism extends to charitable drives through the workplace as well. For two years, she served as the local Armed Services Blood Program (ASBP) event co-coordinator, organizing and overseeing three donation events, which collected nearly 150 units of blood. Additionally, she was the USAMRICD coordinator for the annual Edgewood Area Winter Apparel Drive, which collected winter coats, hats, and gloves for the charity the Sharing Table.

Rousayne not only voluntarily organized the USAMRICD's Combined Federal Campaign, but also served as the coordinator for the 2013 area-wide campaign kickoff event. She was directly involved in such details as setting up the locations, meeting with charities, and coordinating door prizes.



Spc. Cassandra Rousayne, seen here with Aberdeen Proving Ground (APG) Garrison Commander Col. Gregory McClinton, and her family of four were voted the 2014 ABG Military Family of the Year. (U.S. Army photo by Molly Blosse, APG News)

Teyhen Graduates from War College

Col. Deydre S. Teyhen was recognized as a 2014 distinguished honor graduate at the Army War College (only 61 out of 385 graduates recognized as distinguish honor graduates) and her research paper, "Professional Soldier Athlete: The Cornerstone of Strategic Landpower's Human Dimension," was one of six papers that received the Commandant's Award for Distinction in Research.

During this past year she was also selected by U.S. Army War College (USAWC) faculty as one of 10 students to serve as a FY14 Eisenhower Fellows and she traveled to five universities during the year and lectured on national



Col. Deydre S. Teyhen who graduated from the War College this past week on 6 June.

security strategy.

Teyhen truly maximized the War College experience and is extremely excited about going to the Office of the Sugeon General, Directorate of Health and Wellness, where she will be the lead for the Army surgeon general's System for Health and the Performance Triad.

* RECOGNITIONS **************

Tripler Staff Member Wins Top Army Award

By Ana Allen, Pacific Regional Medical Command

Chief Warrant Officer 3 Deanna Swords is the recipient of the 2013 Professional Medical Logisticians' Leadership Award. Swords, chief of Healthcare Equipment Management Branch, Logistics Division at Tripler Army Medical Center (TAMC) and the Pacific Regional Medical Command (PRMC), earned the top Army honor for consistently demonstrating an exceptionally high degree of professional excellence.

Swords says she was completely surprised to discover that she was nominated, let alone selected, and says the recognition could not have been achieved without her valuable team members. "I am extremely proud to be a member of the PRMC/TAMC organization, any positive credit I earn is a direct reflection of the solid leadership and teamwork that is present every day. Just to be a part of that team is itself an honor."

Under Swords' leadership, her team managed 29 maintenance and services contracts worth over \$4 million. Through a cost benefit analysis, she determined that nearly \$1 million in service contracts could be deferred for in-house maintenance.

"CW3 Swords continually meets challenges head on with full purpose of duty and has proven to be an extremely versatile member of the Tripler Army Medical Center. She displays a genuine passion for her responsibilities in ensuring



Chief Warrant Officer 3 Deanna Swords is the recipient of the 2013 Professional Medical Logisticians' Leadership Award. Swords, chief of Healthcare Equipment Management Branch, Logistics Division at Tripler Army Medical Center, earned the top Army honor for consistently demonstrating an exceptionally high degree of professional excellence. (U.S. Army photo by Ana Allen Pacific Regional Medical Command)

the best logistics support is provided," says Col. Alex Zotomayor, PRMC and TAMC chief of logistics.

Swords' accomplishments also directly contributed to Tripler's successful Joint Commission Survey, the nation's oldest and largest standards-setting and accrediting body in healthcare.

"The Healthcare Equipment Management Branch (HEMB) team consists of 47 staff members. We manage planning, acquisition, accountability, repair, contract maintenance, and final

disposition of medical equipment. Over the past year, our team has had incredible success in managing these critical functions, in addition to overhauling many of the processes to optimize our work force and environment. Our objective is to maximize patient safety, remain committed to fiscal responsibility, and ensure compliance with regulatory guidance," Swords said.

"She leaves no stone unturned," says Zotomayor. "She epitomizes the spirit of the Professional Medical Logistician, and is truly deserving of this recognition."

Swords also said she is incredibly fortunate to have remarkable leaders who inspire and encourage her to accept new challenges and to operate outside of her comfort zone. "It is amazing to have leaders who rally for you to succeed. During challenges, they are right beside me because they have chosen to walk with me. Brig. Gen. Dennis Doyle and Col. Zotomayor have been my coaches, teachers, and mentors. Any success my team and I have achieved is also their success."

Medical Logistics is an integral part of the Army Health system. Medical logisticians support the requirements set forth by the surgeon general, providing materiel acquisition and total product lifecycle management for medical material and equipment.

NCQA Recognition

SPC Jordon M. Byrd Health Clinic, Fort Campbell has achieved NCQA Level III Recognition.

Congratulations to the following PCMHs for being selected Regional Best Practice Army Patient-Centered Medical Home for the second-quarter FY 14.

Best Practice by Region – Army Patient Centered Medical Home:

- Hope Mills Community Based Medical Home (Northern Regional Medical Command)
- Fox Army Health Center (Southern Regional Medical Command)
- Madigan-Puyallup Community Based Medical Home (Western Regional Medical Command)
- Grafenwoehr Army Health Clinic (Europe Regional Medical Command)
- Warrior Ohana Medical Home (Pacific Regional Medical Command)





CELEBRATING

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JUST IN...



Competitors photographed at West Point during the 2014 Warrior Trials.

Army Warrior Trials vs Army Warrior Games By Army Medicine Public Affairs

More than 100 Army, Marine Corps, and Air Force athletes competed in archery, cycling, shooting, sitting volleyball, swimming, track and field, and wheelchair basketball tournaments during the 2014 Army Warrior Trials at West Point, June 15-19. Hosted by the U.S. Army Warrior Transition Command (WTC), the trials determined which Army athletes will compete at the 2014 Warrior

Games this fall in Colorado Springs, Colorado. The Warrior Games, a unique partnership between the Department of Defense (DOD) and the U.S. Olympic Committee Paralympic Military Program, is a sports competition for wounded, ill, and injured service members and Veterans representing all branches of the military. After overcoming significant physical and behavioral injuries, these men and women demonstrated the resilience of today's force and the importance of adaptive reconditioning in recovery and transition.

For a list of Army participants, event photos, and final results, visit the official website of U.S. Army Warrior Transition Command at: http://www.wtc.army.mil/ and click on the U.S. Army Warrior Trials 2014 logo.



Army Staff Sgt. Allan Armstrong, Walter Reed Warrior Transition Battalion, stretches prior to track practice at #WestPoint during the 2014 #ArmyWarriorTrials June 15-19 at the West Point Academy, N.Y. (U.S. Army photo by Spc. James K. McCann)



U.S. Army Veteran Michael Kacer from Yonkers N.Y., practices the flutter kick exercise during the 2014 Army Warrior Trials swimming practice at the Arvin cadet physical development center in West Point, N.Y., on June 12, 2014. (U.S. Army photo by Benny Ontiveros)





Retired Sgt. 1st Class Betty Lehman (front) attempts a basketball steal from her opponent, Sgt. Kaduna Baldwin, Warrior Transition Unit, Fort Campbell, Kentucky, during the first evening of wheelchair basketball training at the 2014 Army Warrior Trials, West Point, N.Y. Lehman competed in three #ArmyWarriorTrials sports this year, including track, cycling, and wheelchair basketball. "It helped build my confidence and gave me something to focus on instead of focusing on my injuries. I call it post-traumatic growth instead of post-traumatic stress," said Lehman on the importance of adaptive reconditioning. "We have to go outside of our realm, do something, and focus on our recovery." Learn more about Sgt. 1st Class Lehman at: bit.ly/1kTrP8N.

